

Incidentally, I may mention here that Centres attended by large numbers do not attract the home-loving mother. It is emphatically worth while to have times set apart at the clinic for small areas of the district, and for the attendance at the clinic of the Health Visitor of that area.

The attendance at the Centre of the Health Visitor who goes to the homes ensures a connecting link between the two branches of the work. Having days set apart for small portions of the district would apply of course to Centres in large towns, where the ideal of a Babies' Welcome in each small area is not at present attainable.

The first practical need in regard to a Centre is that it shall be easy of access. The working-class mother cannot afford the time required for a long walk. The arrangements at the Centre must be comfortable for the mother, and, if possible, there should be no stairs—to a woman who has been hard at work it requires an appreciable effort to carry a baby upstairs. The room to which she comes should be well ordered and cheerful. In every way the comfort of the mother should be studied, for then she will be much more ready to listen attentively to our teaching.

Advice given to the mother should be as brief as possible and very definite, while any hint of dogmatism should be carefully avoided. The arrangements at each centre vary considerably. In one case there may be a single room only, borrowed from a dwelling house or institution, and in another there may be a specially-designed building containing ante and post-natal clinic rooms, consulting rooms, a dental department, a well-fitted kitchen for cookery classes, a babies' hospital, and many other features.

As pregnancy is not notifiable, it is difficult to draw out definite schemes for pre-natal classes in the same way that one can for post-natal classes. The co-operation of doctors, midwives, hospitals and maternity homes is much needed. At some future time we may have a better system of co-ordination. There are many things which mean great help to the young mother which can be learnt at pre-natal classes, but the whole teaching should centre round the subject of breast-feeding. The times and details of breast-feeding should be familiar to every mother before the birth of her child. At present the training for the greatest vocation, that of motherhood, is mostly left to chance. This is the essence of Infant Welfare work—training in motherhood, both expectant and actual. (Applause.)

DISCUSSION.

STANDARDISED TEACHING.

Miss Elliott: How can we obtain standardised teaching in the various centres? We hope that in the future this will be possible but, at present, it is not, as we cannot undertake the education of the doctors. (Laughter.) The ideal which we should aim at is a uniform teaching at the centres. At the present time it frequently happens that a mother who has been very difficult

to teach at one Centre goes to another where she is taught on entirely different lines and has theories impressed upon her which are quite in opposition to those which influenced the teaching at the first centre.

Systematic visiting in the homes is already being carried out by Health Visitors, who keep in touch with the mothers, and often find out when a new baby is expected when visiting in the interests of the last one. It is often very difficult to get into touch with the mothers at the pre-natal period in any other way.

Small Centres are much more valuable than large ones, and a mother cannot be expected to go a long distance to a centre if she has one or two toddlers. If the centre serves a small district we are much more likely to get a spirit of comradeship and friendliness among the mothers

DOMESTIC DUTIES.

Miss Holmes: With regard to the latest in some Centres of providing meals for the mothers I am inclined to think that such a system is apt, to a certain extent, to interfere with the home life and its routine. It seems to me that dinners should be unnecessary now that wages have been so much increased. It must to some extent take away from the oneness of the life of the husband and wife. What is he doing while she goes out to dinner, and is it altogether to the benefit of the home that she should be away for several hours in every week attending shoe-mending classes and so forth?

Miss Bower: My experience has been that these classes encourage the mother to take a greater interest in her domestic duties.

TEACH THE GIRLS.

Miss Alderman: It seems to me that the root of the necessity for dealing with the poor mothers and for teaching them lies in the fact that we neglect our girls. After they leave school they ought to have two years' training in domestic work; instead of that they are at once pitchforked into the factory or some other sphere of employment. They get no practical training to fit them for the duties of motherhood. The teaching required for the performance of domestic duties should not be given by the Health Visitors. It should be done to a far greater extent in the schools when the girls are young and their minds receptive. Domestic training and teaching is, to a very large extent, neglected; it is unsatisfactory during the years of girlhood, and we have to face the result of this.

Miss Williams: I entirely agree with Miss Alderman. Among school children I see constantly the results of the lack of education in mothercraft and domestic duties. The young mothers are so often ignorant, and the children's development is bound to be faulty.

RIGHTS OF THE ILLEGITIMATE.

Miss Macdonald: Would you allow the illegitimate child to benefit from the Centre in all

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